

APPLICATION FOR FORT SILL SOLICITATION PERMIT

INFORMATION REQUIRED BY PRIVACY ACT IS ON REVERSE

Permit # _____

SECTION A - IDENTIFICATION

Expiration Date _____

NAME (Last, first, Middle and Show any alias used.) _____

SSN _____

PLACE AND DATE OF BIRTH _____

LOCAL HOME ADDRESS _____

TELEPHONES _____

HOME _____

OFFICE _____

SECTION B - GENERAL INFORMATION

NAME OF ENTERPRISE REPRESENTED _____

ADDRESS _____

TELEPHONE _____

LOCAL BUSINESS NAME _____

ADDRESS _____

TELEPHONE _____

LIST ANY REGISTRATION AND/OR LICENSING REQUIREMENTS AND EXPIRATION DATES OF STATE OR CIVIL AUTHORITIES: _____

List below the Armed Forces installations on which you have solicited in the last 2 years:

MONTH AND YEAR

FROM TO

NAME OF INSTALLATION _____

REASON FOR STOPPING _____

List your employers for the past 5 years.

MONTH AND YEAR

FROM TO

NAME AND ADDRESS OF EMPLOYER / SUPERVISOR _____

REASON FOR LEAVING _____

Have you ever been arrested for any offense, other than a traffic violation? ☐ Yes ☐ No. If answer is "yes", complete the following:

MONTH AND YEAR

NATURE OF OFFENSE

LOCATION OF COURT HEARING

DISPOSITION

LIST ALL PRODUCTS OR SERVICES OFFERED FOR SALE: (ATTACH CATALOG AS APPROPRIATE) _____

SECTION C - STATEMENT BY APPLICANT

1. I have read AR 210-7 and USAFACFS Reg 210-4 or its equivalent Solicitation Guidelines governing personal commercial affairs and I fully understand conditions under which I am authorized to solicit on Fort Sill.
2. I understand that any violation or noncompliance with the regulations may result in withdrawal of the privilege to solicit business for myself and my employer.
3. The above information is true and complete to the best of my knowledge. I understand the refusal to answer a question or the submission of incorrect or misleading information may be the basis for denying, suspending, or revoking my solicitation privilege.

Signature of Applicant _____

Date _____

SECTION D - STATEMENT BY PRESIDENT OR VICE-PRESIDENT OF PARENT ORGANIZATION

1. I understand we are fully responsible for the above-named agent and his actions while on Fort Sill installation.
2. Our organization and our agent meet the registration and licensing requirements of the State of Oklahoma and any other applicable regulatory requirements imposed by civil authorities. Our agent will present documentary evidence of this, upon demand.

Signature of President, Vice-President, or local authority. _____

Date _____

SECTION E - PERMIT INFORMATION

The individual named in Section A is granted the privilege of selling products or services, listed at the end of Section B, on Fort Sill.

A FS Form 285 permit was issued on _____ Permit # _____ expires _____ unless superseded, suspended, or revoked.

SECTION F - SOLICITATION OFFICE INTERNAL REMARKS

1. Required local law enforcement agency name check (FS Form 320) to include Lawton Police Department's and the Provost Marshal's data base, to establish eligibility of individual requesting to solicit on Fort Sill was initiated _____.

2. A FS Form 320 on subject individual was completed on _____ with the following results:

☐ APPROVED

☐ NO RECORD

☐ SEE REMARKS ON ATTACHED FS FORM 320

SECTION G - DATA REQUIRED BY THE PRIVACY ACT OF 1974

Authority: _____ Sec _____

Purpose: Obtain required data on individuals who seek solicitation privileges on Fort Sill military installation.

Routine Use: Information gathered will be used by authorized personnel to determine granting of solicitation privileges.

Disclosure: Voluntary. However, permit may not be granted if information is withheld. Personal information will be kept confidential.